

P99 0000 35156

Investment Professionals  
Requester's Name

4300 N. Federal Hwy., Ste 210  
Address

Boca Raton FL 33431  
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

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|------------------------------------|---|--|
| <input type="checkbox"/> Walk in   | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out  | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy |   |  |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 DEC -9 PM 5:14

R.A. Address

Examiner's Initials LF

12-15-99

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Investment Professionals Education and Information Association, Inc.
2. The mailing address of the corporation is: 4400 North Federal Highway Suite 210 Boca Raton, FL 33431
3. Date of incorporation/qualification: April 16, 1999 Document number: P99000035156
4. The name and address of the current registered agent and office:

Vito A. Bellezza  
4400 North Federal Highway Suite 210  
Boca Raton, FL 33431

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5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Vito A. Bellezza  
4400 North Federal Highway Suite 125  
Boca Raton, FL 33431

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Vito A. Bellezza  
(Signature of an officer, chairman or vice chairman of the board)

12/3/99  
(Date)

VITO A. BELLEZZA, PRES. + R.A.  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

\_\_\_\_\_  
(Signature of Registered Agent)

\_\_\_\_\_  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*